

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 02, 2005 8:00 am
Secretary of State

02-02-2005 90066 048 ***150.00

DOCUMENT # 492348

1. Entity Name

L & M CLEANERS OF PALM BEACH COUNTY, INC.



Principal Place of Business

Mailing Address

210 US #1
N PALM BCH FL 33408
US

210 US #1
N PALM BCH FL 33408
US

J0010000



1st MOORE

CR2E034 (10/04)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1636172

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KRISCHE, MATTHEW
10250 TRAILWOOD CIR.
JUPITER FL 33478

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PV ☐ Delete
NAME KRISCHE, MATHEW
STREET ADDRESS 10250 TRAILWOOD CIRCLE
CITY-ST-ZIP JUPITER FL

TITLE PV ☒ Change ☐ Addition
NAME KRISCHE MATTHEW
STREET ADDRESS 15680 85TH AVE NORTH
CITY-ST-ZIP P. BEACH GARDENS, FL. 33418

TITLE ST ☐ Delete
NAME KRISCHE, LINDA
STREET ADDRESS 10250 TRAILWOOD CIRCLE
CITY-ST-ZIP JUPITER FL

TITLE ST ☒ Change ☐ Addition
NAME KRISCHE LINDA
STREET ADDRESS 15680 85TH AVE NORTH
CITY-ST-ZIP P. BEACH GARDENS, FL. 33418

TITLE D ☐ Delete
NAME KRISCHE, LINDA
STREET ADDRESS 10250 TRAILWOOD CIRCLE
CITY-ST-ZIP JUPITER FL

TITLE D ☒ Change ☐ Addition
NAME KRISCHE LINDA
STREET ADDRESS 15680 85TH AVE NORTH
CITY-ST-ZIP P. BEACH GARDENS, FL. 33418

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/26/05